U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U -	2. Fiscal Year Covered From:
19572	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	Name, file number, and address of labor organization.
Name Thomas R Spivey	Name UA Plumbers & Pipefitters Local Union 295
	Labor Organization File Number 039-008
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 429 Tomoka Avenue	Street 743 North Beach Street
City Ormond Beach	City Daytona Beach
State Florida ZIP Code + 4 32174-6245	State Florida ZIP Code + 4 32114-2279
5. Position in labor organization. Business Manager	
Enter appropriate data below if, during the past fiscal year, you or your spo (except as specified in the exclu-	derived income or other economic benefit of
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	7.b. Amount.
City	şo;
State ZIP Code + 4	
Sign	nature
15. Signature and verification. The undersigned declares, under penalty of	Perjury and other applicable penalties of the law, that all of the information ying documents), has been examined by the signatory and is, to the best of the
signed Thomas R Spring	On 7/11/2005 386-677-6421
Signed Thomas K Spring	On [7/11/2005] 386-677-6421

Name of Person Filing Thomas Spivey		File Number U-	
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acli (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the busines vely seeking to represent, or lirectly to, or otherwise	s	
8. Name and address of Business (including trade name, if any). Name UA Plumbers & Pipefitters Local Union 719 Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 2502 South Andrews Avenue City Ft. Lauderdale State Florida ZIP Code + 4 33316-3964	9. Business deats with: X a. Labor Organiza b. Trust c. Employer	ition	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	11.a. Nature of such dea Brother/Sister Loc Pipefitters	ing	&
City State ZIP Code + 4			
	12.b. Amount.		\$20
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money	er parts A and B above)		41
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment.		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.		

Name of Person Filing Thomas Spivey	File Number U-

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Florida Pipetrades Council Incorporated	a. Labor Organization	
Trade Name, if any: Florida Pipetrades		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 3950 West Pensacola Street	c. Employer	
City Tallahassee		
State Florida ZIP Code + 4 32304-2872		
10. If 9.b. or 9.c is checked give trust or employer's name	11.a. Nature of such dealing.	
Name	Promotes & furthers the interests, being of those working in the plum pipefitting industry, promotes fel	bing and
Trade Name, if any:	membership, fosters legislation as	
P.O. Box, Bldg., Room No., if any		
Street		
City		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$32,212
	12.a. Nature of interest held or income received.	
	Received dinner at a business mana the international representative o	
	[
	12.b. Amount.	\$40

Name of Person Filing	Thomas	Spivey		File Number U-	

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (include	ding trade name, if any).	9. Business deats with:	
Name WW Gay Mechanical Cont	ractors	a. Labor Organization	:
Trade Name, if any:		a. Labor Organization	
P.O. Box, Bldg., Room No., if any		b. Trust	
Street 524 Stockton Street		c. Employer	
City Jacksonville			
State Florida	ZIP Code + 4 32204-2535		
10. If 9.b. or 9.c. is checked give trust or em	ployer's rame	11.a. Nature of such dealing.	
Name		Signatory employer	
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			}
Street			
City			
State	ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$8,800
		12.a. Nature of interest held or income received.	
		Bought lunch after visit to job sid Plumbers & Pipef. ters Local Union employed	ght where UA 295 members were
			İ
		i	
		12.b. Amount.	\$10

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Name of Person Filing Thomas Spive	У	File Number U-	,

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Florida Pipetrades Council Incorporated	a. Labor Organization	
Trade Name, if any:	La cassi organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 3950 West Pensacola Street	c. Employer	
City Tallahassee		
State Florada ZIP Code + 4		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Promotes & furthers the interests, being of those working in the plum	safety and well
Trade Name, if any:	pipefitting industry, promotes fell membership, fosters legislation as:	lowship among its
	& Pipefitters	
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$32,212
	12.a. Nature of interest held or income received.	
	Received Pizza Hut lunch at a busi meeting with the international rep the UA	
		į
	12.b. Amount.	\$10

Name of Person Filing Thomas Spivey	File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name UA Plumbers & Pipefitters Local Union 123	 	
Trade Name, if any:	251	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 4923 West Cypress Street	c. Employer	
City Tampa		
State Florida ZIP Code + 4 33607-3801		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dea ing.	
Name	Brother/Sister Lccal Union of UA P Pipefitters	lumbers &
Trade Name, fany:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dolar value of such dealing.	\$0
	12.a. Nature of interest held or income received.	
	Received meal at Business Managers Miami provided by UA Plumbers & Pi Union 123	meeting held in epefitters Local
	12.b. Amount.	\$40